

Olney Crossing Homeowners Association  
PO BOX 278  
Olney, Maryland 20832  
www.olneycrossingmd.org

**REQUEST FORM FOR ARCHITECTURAL CHANGE**

Date Submitted: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

IN ACCORDANCE WITH THE DECLARATION OF COVENANTS, BYLAWS, AND ACC POLICIES, PROCEDURES AND GUIDELINES OF OLNEY CROSSING HOMEOWNERS ASSOCIATION (OCHA), I/WE HEREBY APPLY FOR WRITTEN CONSENT TO MAKE THE FOLLOWING EXTERIOR ALTERATIONS OR CHANGE TO OUR PROPERTY.

TYPE OF IMPROVEMENT/MODIFICATION/ADDITION (A SEPARATE FORM MUST BE SUBMITTED FOR EACH IMPROVEMENT) SUBMITTED FOR REVIEW):

- |                                  |   |                                   |
|----------------------------------|---|-----------------------------------|
| <input type="radio"/> Deck       | <input type="radio"/> Storm Door/Windows        | <input type="radio"/> Shed*       |
| <input type="radio"/> Addition*  | <input type="radio"/> Painting                  | <input type="radio"/> Fence*      |
| <input type="radio"/> Landscape* | <input type="radio"/> Patios/walkways/driveways | <input type="radio"/> Other _____ |

ESTIMATED TIME WHEN THE PROJECT WILL BEGIN: \_\_\_\_\_ COMPLETE: \_\_\_\_\_

\_\_\_\_\_

ATTACH SUPPORTING DOCUMENTS SUCH AS A PLOT MAP, DRAWINGS, PICTURES, SWATCHES, ETC.

DESCRIPTION OF IMPROVEMENT:

If more space is required, attach additional sheets

\*in cases where structures or landscaping falls near property lines, neighbor notification will be required. In such cases a signature block is provided.

**ALL APPROVALS ARE FOR CONFORMITY OF GOOD, ESTHETIC AND HARMONIOUS DESIGN STANDARDS ONLY. THE OCHA ACC DOES NOT TAKE RESPONSIBILITY FOR BUILDING PERMITS, ENGINEERING, WATER FLOW, OR OTHER AREAS THAT MAY REQUIRE PROFESSIONAL OR TECHNICAL ASSISTANCE.**

Signature of Homeowner(s): \_\_\_\_\_  
\_\_\_\_\_

**NEIGHBOR NOTIFICATION:**

**Neighbor 1:**

I/We have been notified of the alterations described in this application.

I/We have some concerns about this proposal.

Yes  No

Signatures: \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Neighbor 2:**

I/We have been notified of the alterations described in this application.

I/We have some concerns about this proposal.

Yes  No

Signatures: \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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**OCHA Architectural Control Committee Use Only**

Received: \_\_\_\_\_ Date Action Taken: \_\_\_\_\_ Response Mailed: \_\_\_\_\_

Approved  Disapproved  Approved with the following Changes (see comments)

Signatures: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Comments: